



2015

Young Life and Times Survey»



The first questions we would like to ask are about you and your family.

1. What is your gender identity?

- Male ☒ 1
Female ☐ 2
Male to female transgender ☐ 3
Female to male transgender ☐ 4
Other (Please write in) ☐ 5

2. How many years have you lived in Northern Ireland? (Please write in)

_____ Years

3. If you have not always lived in Northern Ireland, what other countries have you lived in?

4. Would you describe the place where you live as... (Please tick ONE box only) ✓

- A big city ☐ 1
The suburbs or outskirts of a big city ☐ 2
A small city or town ☐ 3
A country village ☐ 4
A farm or home in the country? ☐ 5
I don't know ☐ 6

5. To which ethnic group do you consider you belong?

6. Do you consider yourself to be a member of a minority ethnic community? ✓

- Yes ☐ 1
No ☐ 2

7. What have you been doing since October 2015? (Please tick ONE box only) ✓

- At school or college full time ☐ 1
Working full time ☐ 2
Working part time ☐ 3
At school or college and working part time ☐ 4
On a training scheme ☐ 5
Unemployed ☐ 6
Other (Please write in) ☐ 7

8. What do you think you will be doing in two years time, in October 2017? (Please tick ONE box only) ✓

- Going to college or university full time ☐ 1
Working full time ☐ 2
Working part time ☐ 3
At college or university and working part time ☐ 4
On a training scheme ☐ 5
Unemployed ☐ 6
Other (Please write in) ☐ 7



**9. What type of school do you attend?
If you have left school, what type of
school did you last attend?**
(Please tick ONE box only)

- ✓
- Planned Integrated ☐ 1
- Grammar ☐ 2
- Secondary ☐ 3
- Irish language ☐ 4
- Special School ☐ 5
- Other (Please write in) ☐ 6
-

10. Would you describe your school as...
(Please tick ONE box only)

- ✓
- All or nearly all Protestant ☐ 1
- All or nearly all Catholic ☐ 2
- Mostly Protestant ☐ 3
- Mostly Catholic ☐ 4
- About half Protestant and half Catholic ☐ 5
- I don't know ☐ 6

**11. Do you have any physical or mental health
conditions or illnesses lasting or expected
to last for 12 months or more?**

- ✓
- Yes (Please go to the next question) ☐ 1
- No (Please go to question 13) ☐ 2

**12. Does your condition or illness/do any of
your conditions or illnesses reduce your
ability to carry out day-to-day activities?**

- ✓
- Yes, a lot ☐ 1
- Yes, a little ☐ 2
- No, not at all ☐ 3

**13. Which of the following statements
applies best to you?**

(Please tick ONE box only)

- ✓
- I have felt sexually attracted:
- ...only to females and never to males ☐ 1
- ...more often to females and at least
once to a male ☐ 2
- ...about equally often to females
and males ☐ 3
- ...more often to males and at least
once to a female ☐ 4
- ...only to males and never to females ☐ 5
- I have never felt sexually attracted to
anyone at all. ☐ 6

**14. Do you currently live with your parents,
including adoptive parents?**

- ✓
- Yes, with my mother and my father
in the same household ☐ 1
- Yes, with my mother, but not my father ☐ 2
- Yes, with my father, but not my mother ☐ 3
- Yes, with my mother for some of the
time, and with my father for some of
the time ☐ 4
- Other (Please say who you live with) ☐ 5
-

**15. How well off do you think your family is
financially?**

- ✓
- Not at all well off ☐ 1
- Not very well off ☐ 2
- Average ☐ 3
- Well off ☐ 4
- Very well off ☐ 5
- I don't know ☐ 6

Most young people help out at home with, for example, shopping or cleaning. However, some also provide ongoing care and support to someone who is elderly, has a long term illness or a disability. Sometimes called 'Young Carers', they help with everyday tasks, such as, helping someone to get washed and dressed, providing someone with emotional support and reassurance, or watching over them so that they stay safe.

16. Thinking about what we have said above, do you give any special help or extra care to someone?

- Yes ☒ 1
No (Please go to question 29) ☐ 2
I don't know ☐ 3

17. Please tell us who you care for.
(Please tick ALL that apply)

- ☒ Your mother ☐ 1
☐ Your father ☐ 1
☐ Your brother or sister ☐ 1
☐ Your grandmother or grandfather ☐ 1
☐ Somebody else (Please write in) ☐ 1

18. Does the person/people you care for live with you?

- ☒ Yes, they live with me ☐ 1
☐ No, they do not live with me ☐ 2
☐ Some live with me and some don't live with me ☐ 3

19. Why do they need your help or care?
(Please tick ALL that apply)

- ☒ They are elderly ☐ 1
☐ They have a physical illness or disability ☐ 1
☐ They have a learning disability ☐ 1
☐ They have a mental illness ☐ 1
☐ They have problems with drugs and alcohol ☐ 1
☐ Some other reason (Please write in)

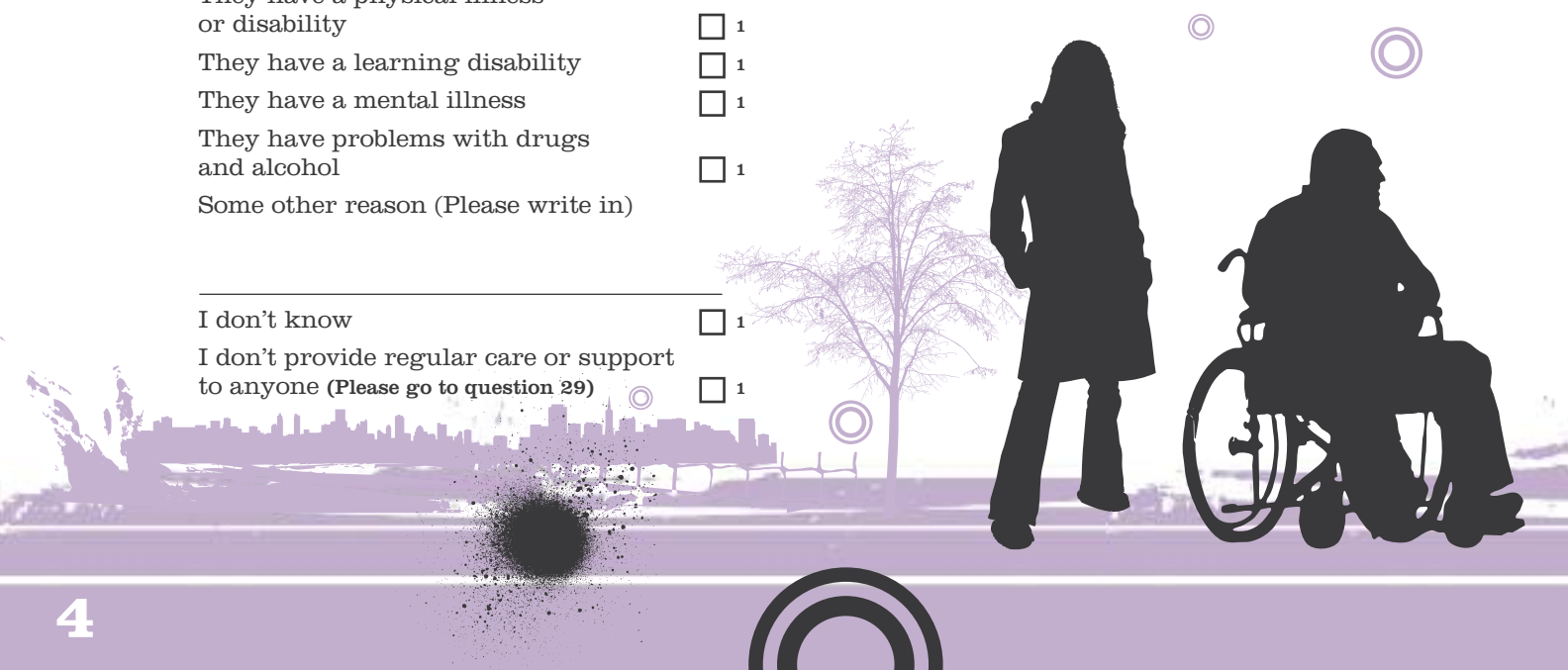
- ☐ I don't know ☐ 1
☐ I don't provide regular care or support to anyone (Please go to question 29) ☐ 1

20. Taking account of all the help you give, including travelling time, about how long do you spend looking after people in an average week? (Please tick ONE box only)

- ☒ 0-2 hours per week ☐ 1
☐ 3-4 hours per week ☐ 2
☐ 5-9 hours per week ☐ 3
☐ 10-19 hours per week ☐ 4
☐ 20-29 hours per week ☐ 5
☐ 30-34 hours per week ☐ 6
☐ 35 hours or more per week ☐ 7
☐ It is hard to put into hours it is just part of my everyday life ☐ 8
☐ It is unpredictable as the person I care for has good and bad days ☐ 9

21. How long have you been caring or helping like this? (Please tick ONE box only)

- ☒ Up to 6 months ☐ 1
☐ 6-12 months ☐ 2
☐ Over 1 year but less than 3 years ☐ 3
☐ 3-5 years ☐ 4
☐ Over 5 years ☐ 5
☐ I don't know ☐ 6



22. What kind of caring task do you do?

(Please tick ALL that apply)

- Personal care e.g. helping with washing, dressing, eating, toilet ☐ 1
- Physical care e.g. helping in/out of bed/chair, getting up/down stairs ☐ 1
- Practical care e.g. shopping, housework, gardening ☐ 1
- Emotional care e.g. providing reassurance, helping them not to stress, keeping them company ☐ 1
- Helping to manage household finances ☐ 1
- Managing medication ☐ 1
- Looking after my brothers and sisters when my parent or guardian can't cope ☐ 1
- Other (Please write in) ☐ 1

23. Have you told anyone outside your family about your caring role?

- No ☐ 1
- Yes (Please say who you have told) ☐ 2

26. Is there any person and/or organisation that you can go to for help if you are feeling stressed about your caring responsibilities?

- Yes (Please write in) ☐ 1

24. Do you feel that the caring you do is private and should not be spoken about outside your family?

- Yes ☐ 1
- No ☐ 2
- I don't know ☐ 3

- No ☐ 2
- I don't know ☐ 3

25. Does your family feel that the caring that you do is private and should not be spoken about outside the family?

- Yes ☐ 1
- No ☐ 2
- I don't know ☐ 3



27. Everyone's experience of caring for someone is different. Please say how much you agree or disagree with the following statements. (Please tick ONE box in EACH row)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	I don't know
I enjoy caring	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I am unable to attend out-of- school activities due to my caring responsibilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I never miss school because of my caring role	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I worry all the time about the person I care for when I am not with them	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Caring does not stop me from going out and doing things with my friends	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I often get stressed out due to my caring role	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Caring does not affect my schoolwork	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I'm always fully involved in decisions made about the care of the person I care for	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I feel guilty about going out, socialising and leaving the person I care for	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I have been excluded or bullied because I care for someone	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

28. Is there anything else you would like to say about being a Young Carer?

The next few questions are about your experiences of community relations in Northern Ireland.

- 29. Would you describe your area as...** ✓
- Mainly Catholic ☐ 1
- Mainly Protestant ☐ 2
- Mixed ☐ 3
- I don't know ☐ 4

Some people feel a sense of belonging in their neighbourhood because they have things in common with other people living there, for example, they might have lots of friends and family or there might be people of the same religion. Other people feel a sense of belonging just because they know their neighbours and people say hello to them in the street. Sometimes people don't feel that they belong because other people in the neighbourhood are very different to them.

- 30. Thinking about your neighbourhood, the kind of place it is and the kind of people who live there, would you say that you feel a sense of belonging to your neighbourhood?** ✓
- Yes, definitely (Please go to question 32) ☐ 1
- Yes, probably (Please go to question 32) ☐ 2
- Probably not ☐ 3
- Definitely not ☐ 4
- I don't know (Please go to question 32) ☐ 5

- 31. Please explain why you DO NOT feel a sense of belonging to your neighbourhood.**
- _____
- _____
- _____

- 32. Do you feel that you have any influence when it comes to any of the local decisions made in your neighbourhood?** ✓
- Yes, definitely ☐ 1
- Yes, probably ☐ 2
- Probably not ☐ 3
- Definitely not ☐ 4
- I don't know ☐ 5

- 33. And thinking about Northern Ireland as a whole, the kind of place it is and the kind of people who live here, would you say that you feel a sense of belonging to Northern Ireland?** ✓
- Yes, definitely (Please go to question 35) ☐ 1
- Yes, probably (Please go to question 35) ☐ 2
- Probably not ☐ 3
- Definitely not ☐ 4
- I don't know (Please go to question 35) ☐ 5

- 34. Please explain below why you DO NOT feel a sense of belonging to Northern Ireland.**
- _____
- _____
- _____

- 35. Do you feel that you have any influence when it comes to any of the decisions made about what happens in Northern Ireland?** ✓
- Yes, definitely ☐ 1
- Yes, probably ☐ 2
- Probably not ☐ 3
- Definitely not ☐ 4
- I don't know ☐ 5



36. Do you think the following facilities in this area are 'shared and open' to both Protestants and Catholics? (Please tick ONE box in EACH row)

	Yes definitely	Yes probably	No probably not	No definitely not	None in this area	I don't know
Leisure centres	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Parks	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Libraries	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Shops	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

37. Supposing there was an event that you wanted to go to in a nearby town. How safe do you think you would feel going to it if it was to be held on these premises? (Please tick ONE box in EACH row)

	Very safe	Quite safe	Neither safe nor unsafe	Quite unsafe	Very unsafe	I don't know
A GAA club	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
An Orange Hall	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
A Catholic Secondary School	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
A Protestant Secondary School	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

38. Has there been any time in the last year when you personally have felt intimidated by:
(Please tick ONE box in EACH row)

	Yes	No	I don't know
Republican kerb paintings murals or flags	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Loyalist kerb paintings murals or flags	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

39. Do you regard yourself as belonging to any particular religion?

- Yes ☐ 1
- No (Please go to question 41) ☐ 2

40. If yes, which?

- Church of Ireland (Anglican) ☐ 1
- Catholic ☐ 2
- Presbyterian ☐ 3
- Methodist ☐ 4
- Baptist ☐ 5
- Free Presbyterian ☐ 6
- Brethren ☐ 7
- Other (Please write in) ☐ 8

41. Which of these best describes the way you think of yourself? (Please tick ONE box only)

- British ☐ 1
- Irish ☐ 2
- Ulster ☐ 3
- Northern Irish ☐ 4
- Other (Please write in) ☐ 5
- I don't know ☐ 6

42. Some people feel very strongly about their NATIONAL identity, that is, whether they feel British or Irish or something else. Other people say that their national identity is not important to them. How important is your national identity to you?

- Very important ☐ 1
- Quite important ☐ 2
- Neither important nor unimportant ☐ 3
- Not very important ☐ 4
- Not at all important ☐ 5
- I don't know ☐ 6

43. How often do you socialise or play sport with people from a different religious community to yourself? ✓

- Very often ☐ 1
Sometimes ☐ 2
Rarely ☐ 3
Never ☐ 4
I don't know ☐ 5

44. About how many of your friends would you say have the same religious background as you? ✓

- All ☐ 1
Most ☐ 2
Half ☐ 3
Less than half ☐ 4
None ☐ 5
I don't know ☐ 6
Other (Please write in) ☐ 7

45. And how often do you socialise or play sport with people from a different ethnic background to yourself? ✓

- Very often ☐ 1
Sometimes ☐ 2
Rarely ☐ 3
Never ☐ 4
I don't know ☐ 5

46. About how many of your friends would you say are the same race or ethnic origin as you? ✓

- All ☐ 1
Most ☐ 2
Half ☐ 3
Less than half ☐ 4
None ☐ 5
I don't know ☐ 6
Other (Please write in) ☐ 7

47. How favourable or unfavourable do you feel about people from...
(Please tick ONE box in EACH row)

	Very favourable	Quite favourable	Neither favourable nor unfavourable	Quite unfavourable	Very unfavourable	I don't know
The Catholic community	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
The Protestant community	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Minority ethnic communities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

48. Thinking about your time in school, have you yourself ever witnessed any kind of racist bullying or harassment in your school? ✓

- Yes ☐ 1
No ☐ 2

49. Do you know anyone personally who has been the victim of any kind of racist harassment or assault outside of school? ✓

- Yes ☐ 1
No ☐ 2

50. And would you describe yourself as very prejudiced against people of minority ethnic communities, a little prejudiced, or not prejudiced at all? ✓

- Very prejudiced ☐ 1
A little prejudiced ☐ 2
Not prejudiced at all (Please go to question 52) ☐ 3
I don't know (Please go to question 52) ☐ 4

51. What do you think is the main reason that you feel prejudiced? (Please write in)



52. What about relations between Protestants and Catholics? Would you say they are better than they were 5 years ago, worse, or about the same now as then? ✓

- Better ☐ 1
Worse ☐ 2
About the same ☐ 3
Other (Please write in) ☐ 4

I don't know ☐ 5

53. And what about in 5 years' time? Do you think relations between Protestants and Catholics will be better than now, worse than now, or about the same as now? ✓

- Better ☐ 1
Worse ☐ 2
About the same ☐ 3
Other (Please write in) ☐ 4

I don't know ☐ 5

54. Do you think that religion will always make a difference to the way people feel about each other in Northern Ireland? ✓

- Yes ☐ 1
No ☐ 2
Other (Please write in) ☐ 3

I don't know ☐ 4

55. If you had a choice, would you prefer to live in a neighbourhood with people of only your own religion, or in a mixed-religion neighbourhood? ✓

- Own religion only ☐ 1
Mixed-religion neighbourhood ☐ 2
Other (Please write in) ☐ 3

I don't know ☐ 4

56. And if you were looking for a job, would you prefer a workplace with people of only your own religion, or a mixed-religion workplace? ✓

- Own religion only ☐ 1
Mixed-religion workplace ☐ 2
Other (Please write in) ☐ 3

I don't know ☐ 4

57. And if you were deciding where to send your children to school, would you prefer a school with children of only your own religion or a mixed-religion school? ✓

- Own religion only ☐ 1
Mixed-religion school ☐ 2
Other (Please write in) ☐ 3

I don't know ☐ 4

58. Is there anything else you would like to say about community relations in Northern Ireland?



The next few questions are about sports and physical activities.

Physical activity can be done in school – in sports, school activities, playing with friends or walking to school. It can include many activities, for example, walking quickly, dancing, cycling, skateboarding, rollerblading, trampolining, football, gymnastics, athletics.

59. In a normal week, would you do any of the following things? (Please tick ALL that apply)

- Walk or cycle to school, college or work ☒ 1
- Do PE in school, college or work ☐ 1
- Take part in sports in a sports club, organised activity or a gym outside school ☐ 1
- Take part in outdoor adventure activities e.g. canoeing, mountain biking, climbing ☐ 1
- Undertake any other physical activity in your spare time (Please write in) ☐ 1
- _____
- _____
- I do none of these things ☐ 1

60. How many times during a normal week would you spend at least 60 minutes during a day playing sports or doing some physical activity? You don't have to do the 60 minutes all together, but you have to be active for at least 10 minutes at a time doing something that makes you sweaty and/or out of breath. (Please tick ONE box only)

- Never ☐ 1
- Once a week ☐ 2
- 2-3 times a week ☐ 3
- 4-6 times a week ☐ 4
- 7 times a week ☐ 5
- More often ☐ 6



61. Please name the three main types of sport you play or physical activities you do in a normal week.

1. _____ 2. _____ 3. _____

62. How much do you enjoy the following? (Please tick ONE box in EACH row)

	A lot	A little	Not at all	I don't do this
PE classes in school/college	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Sports outside of school e.g. in a sports club or leisure centre	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Physical activity not organised by school, or sports or leisure clubs e.g. family cycle or walk	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Doing outdoor adventure activities e.g. surfing, orienteering, kayaking	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

63. Below are some reasons why people take part in sports or physical activity. How important are these reasons to you? (Please tick ONE box in EACH row)

	Very important	Somewhat important	Not very important	Not important	I can't choose
To be fit and healthy	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
To gain new skills	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
To have fun and meet friends	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
To look good	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
To compete with others	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

64. Compared to how much sports or physical activity you currently do, would you like to do more, less or about the same?

(Please tick ONE box only)

- ✓
- A lot more ☐ 1
- A little more ☐ 2
- About the same ☐ 3
- A little less ☐ 4
- A lot less ☐ 5
- I don't know ☐ 6

65. Which, if any, of the following reasons prevent you from taking part in sports and physical activity more often?

(Please tick ALL that apply)

- ✓
- Not enough time ☐ 1
- Poor health or a disability ☐ 1
- I don't have anyone I can go with ☐ 1
- Difficulty in getting there/lack of transport ☐ 1
- The costs involved ☐ 1
- I don't know where I can do the activities I want to do ☐ 1
- Some other reason (Please say what) ☐ 1

Nothing prevents me. ☐ 1

66. Has anyone ever encouraged or inspired you to take part in sports?

(Please tick ALL that apply)

- ✓
- My family ☐ 1
- A teacher in my school/college ☐ 1
- My friends ☐ 1
- A famous person ☐ 1
- Someone else (Please write in) ☐ 1

No one has inspired or encouraged me ☐ 1

67. And do you have any sports idols or role models? These are sports personalities that you admire.

My sports idol is

I don't have a sports idol ☐ 1

68. Have you ever received any tuition or coaching from an instructor or coach (other than in PE lessons) to help improve your performance in any sport or physical activity?

- ✓
- Yes ☐ 1
- No ☐ 2
- I can't remember ☐ 3

69. Have you ever helped with any sports coaching or instructions, including helping in sports-based summer schemes?

- ✓
- Yes ☐ 1
- No ☐ 2



70. How much do you think sport and physical activity help you to improve:
(Please tick ONE box in EACH row)

	A lot	A little	Not at all	I don't know
Your physical health	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Your mental and emotional health	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

71. And, in general, how would you say your health is? ✓

Excellent ☐ 1

Very good ☐ 2

Fair ☐ 3

Poor ☐ 4

72. And do you think your body size is: ✓

Much too thin ☐ 1

A bit too thin ☐ 2

About the right size ☐ 3

A bit too fat ☐ 4

Much too fat ☐ 5

I don't think about it ☐ 6

I don't know ☐ 7

73. Do you think you are good at sport?
(Please tick ONE box only)

Yes, very good ☐ 1

Yes, quite good ☐ 2

Not good at all ☐ 3

I don't know ☐ 4

74. Are you involved in an organised squad or programme for talented sportspeople in your sport (e.g. at county or Northern Ireland level)? ✓

Yes ☐ 1

No ☐ 2

I don't know ☐ 3

75. Have you ever participated in a project that used sports to bring young people from different ethnic or religious backgrounds together? (Please tick ONE box only) ✓

Yes ☐ 1

No ☐ 2

I can't remember ☐ 3

76. And would you like to participate in a sports project like that in the future? ✓

Yes ☐ 1

No ☐ 2

I don't know ☐ 3

The next few questions are about some of your experiences in school.

77. The Government is working on plans to improve schooling in Northern Ireland whereby all schools will be expected to share classes, teachers, or facilities with other schools. How do you feel about these changes? ✓

- Very favourable ☐ 1
- Favourable ☐ 2
- Neither favourable nor unfavourable ☐ 3
- Very unfavourable ☐ 4
- I don't know ☐ 5

78. What do you think the Government needs to think about when it is working on its plans for schools? (Please tick ALL that apply) ✓

- Saving money ☐ 1
- Making sure pupils can study any subjects they want to, no matter what school they go to ☐ 1
- Not having separate schools for Catholics and Protestants ☐ 1
- Keeping separate schools, but giving more opportunities for Catholic and Protestant pupils to get to know each other and do things together in school ☐ 1
- Making all post-primary schools 'all ability' schools, so there are no grammar schools and no transfer tests ☐ 1
- Keeping the transfer tests and grammar schools ☐ 1
- Making sure pupils don't have to travel too far to get to school ☐ 1
- Other (Please write in) ☐ 1

79. Sometimes schools get together with other schools. Pupils might go to another school to use the computers or swimming pool, or do classes or projects with the pupils from the other school. Have you ever done anything like this? ✓

- Yes ☐ 1
- No (Please go to question 84) ☐ 2
- I don't know (Please go to question 84) ☐ 3

80. If yes, please tick ALL the things you have done ✓

- We have done projects with pupils from other schools ☐ 1
- We have used or shared sports facilities or equipment, like computers ☐ 2
- We have had classes with pupils from other schools) ☐ 3
- Something else (Please write in) ☐ 4

81. When you had classes, or did projects together or shared facilities did you go to another school or did the other pupils you were sharing with come to your school? (Please tick ALL that apply) ✓

- We went to the other school ☐ 1
- The other pupils came to our school ☐ 1
- We were not in school ☐ 1

82. Were the pupils from the other schools a different religion to you? (Please tick ONE box only) ✓

- All of them were a different religion to me ☐ 1
- Some of them were a different religion to me ☐ 2
- None of them were a different religion to me ☐ 3
- I don't know ☐ 4

83. And how much do you agree or disagree with the following statements?
(Please tick ONE box in EACH row)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	I don't know
I enjoyed doing projects with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I enjoyed having classes with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I enjoyed sharing equipment and facilities with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

84. How do you think you would feel if your school did get together with other schools to do classes or projects or share facilities with them? (Please tick ONE box in EACH row)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	I don't know
I would enjoy doing projects with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I would enjoy having classes with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
I would enjoy sharing equipment and facilities with other schools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

85. Here are some of the things that you might like or dislike about pupils from different schools getting together to share classes or facilities or to do projects. Please tick ONE option in each row to show how much you would like or would not like each one.

	Would like a lot	Would like a little	Would not like very much	Would not like at all	I don't know
Sharing sports facilities and computers or equipment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Getting different teachers	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Travelling to a different school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Doing classes we don't normally get to do at our school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Making new friends	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Being with young people who are a different religion to me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Being with young people who are a different ethnic background to me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5



- 86. Suppose a group of young people from another school/college were coming to do a project with your class, would you mind if they were from these kinds of schools?**
(Please tick ONE box in EACH row)

	I would mind a lot	I would mind a little	I would not mind at all	I don't know
An all-boys school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
An all-girls school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
A school for young people with special needs or disabilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
A primary school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
A school where most of the pupils are of a different religion to you	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
An Integrated school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
A Grammar school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
A non-Grammar school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

- 87. A shared campus could be two or more schools with pupils from Catholic and Protestant backgrounds either sharing facilities in each other's schools or sharing a single school building. If your school was part of a shared campus do you think there should be:**

	Yes	No
...One school entrance	<input type="checkbox"/> 1	<input type="checkbox"/> 2
...Shared sports hall/dining room	<input type="checkbox"/> 1	<input type="checkbox"/> 2
...Shared bus to/from school	<input type="checkbox"/> 1	<input type="checkbox"/> 2
...One school uniform	<input type="checkbox"/> 1	<input type="checkbox"/> 2

- 88. If you were in a shared campus do you think you would ...**

	✓
Like it a lot	<input type="checkbox"/> 1
Like it a little	<input type="checkbox"/> 2
Not like it at all	<input type="checkbox"/> 3
I don't know	<input type="checkbox"/> 4

- 89. What do you think you would like or dislike about a shared campus?**



The next few questions focus on sexual exploitation of young people under the age of 18. If you are personally affected by some of the questions below and want to talk to someone about this, you can contact Barnardo's Safe Choices project: 028 9065 8511

Child Sexual Exploitation (CSE) is a form of abuse in which children or young people are tricked, bribed or persuaded to take part in sexual activity in return for something they want or need. This can happen online or offline. The things young people might be given in return can include attention, affection, food, cigarettes, money, drugs, alcohol or somewhere to stay. The sexual activity might include sending or viewing sexual images, sexual conversations or some kind of physical sexual contact. The person getting the young person to do this may be an adult or someone of a similar age to them.

90. How much do you know about the sexual exploitation of children and young people? ✓

- A lot ☐ 1
A little ☐ 2
Nothing ☐ 3
Not sure ☐ 4

91. Do you think child sexual exploitation happens: ✓

- Only to young males ☐ 1
More often to young males than to young females ☐ 2
Equally often to young males and young females ☐ 3
More often to young females than young males ☐ 4
Only to young females ☐ 5
I don't know ☐ 6

92. Please explain why you think this.

93. If you know any MALES this has happened to, what age were they when this first happened to them? (Please tick ALL that apply) ✓

- Under 13 ☐ 1
13-15 ☐ 1
16-17 ☐ 1
This has not happened to any male I know ☐ 1
I don't know ☐ 1

94. Do you think reporting sexual exploitation is: (Please tick ONE box only) ✓

- ...harder for young males than for young females ☐ 1
...equally hard for young males and young females ☐ 2
...harder for young females than for young males ☐ 3
I don't know ☐ 4

95. If someone tried to take advantage of you sexually, how likely would you be to report this? ✓

- Definitely report this ☐ 1
Probably report this ☐ 2
Probably not report this (Please go to question 97) ☐ 3
Definitely not report this (Please go to question 97) ☐ 4
I don't know (Please go to question 97) ☐ 5

96. And who would you report this to? (Please tick ALL that apply) ✓

- A friend ☐ 1
A parent/carer ☐ 1
A teacher ☐ 1
A youth worker ☐ 1
A sibling ☐ 1
The Police ☐ 1
A helpline, such as Childline ☐ 1
A confidential website ☐ 1
Other (Please write in) ☐ 1

Not sure ☐ 1

(Please tick ALL that apply)

A feeling of shame ☐ 1

Having got a poor response when

Difficulty explaining what happened ☐ 1

No one will believe me □ 1

(Please tick ONE box only)

Young females	2
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and females (Please go to question 100) ☐ 3

(Please tick ALL that apply) ✓

Males are seen as abusers rather

If abuser is female and the victim

Other reasons (Please write in) ☐ 1

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Young Men

Young women

This is the same for both \square

101. Is there anything else you would like to say about the sexual exploitation of your own gender?

$\frac{2}{3}A_1$

The final two questions are about your aspirations to study outside the UK and the value of learning an additional language.

102. When you finish school/college in Northern Ireland would you consider:

	Yes	No	I don't know
...Studying outside the UK	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
...Doing an apprenticeship/internship outside the UK	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
...Working outside the UK	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

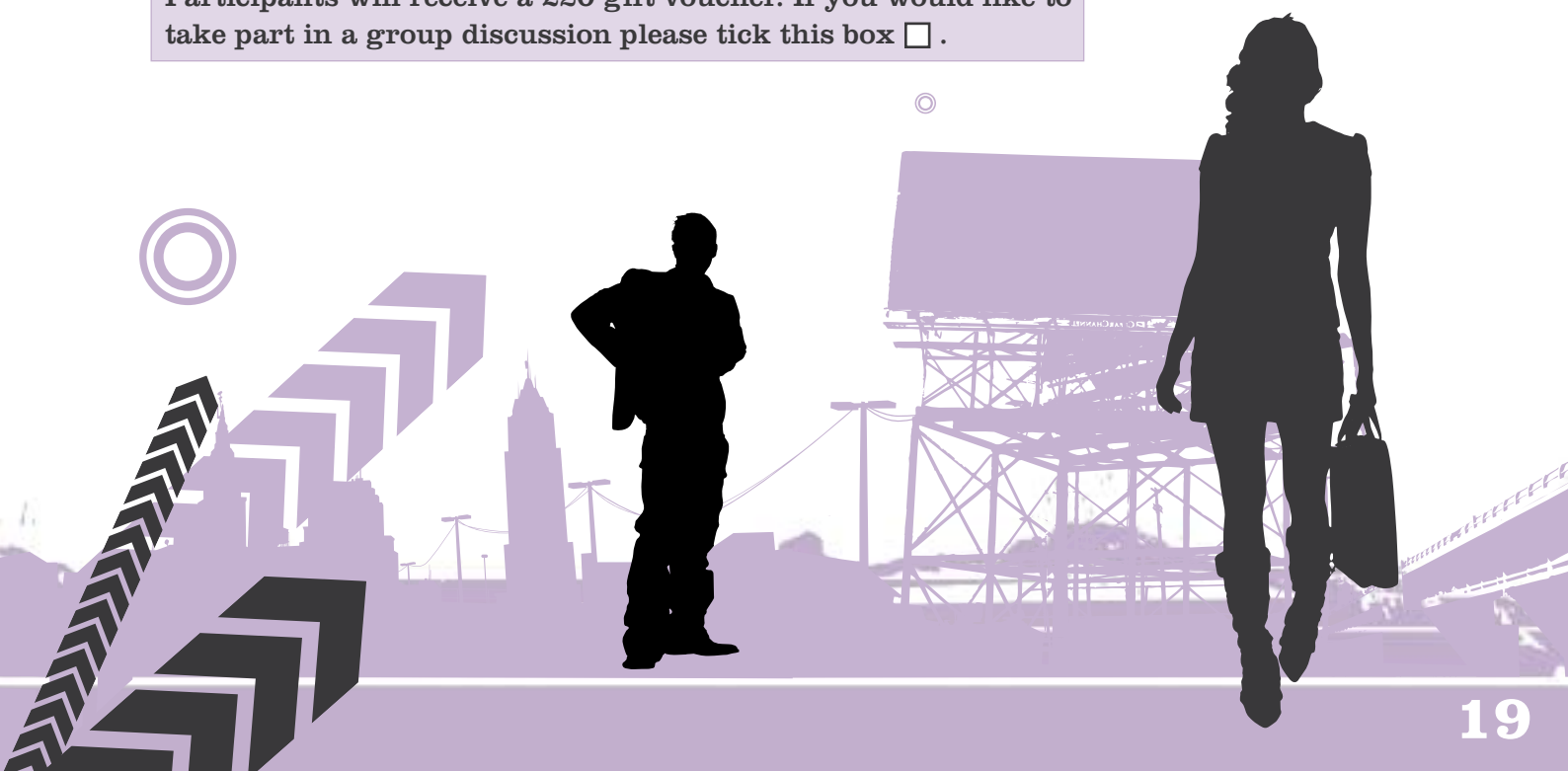
103. Thinking of the future, do you think that learning an additional language will be valuable for you? (Please tick ALL that apply) ✓

- Yes, for study ☐ 1
- Yes, for work ☐ 1
- Yes, for travel/leisure ☐ 1
- Yes, for something else (Please write in) ☐ 1

No, I don't think I will need any language other than English ☐ 1



On behalf of the British Council, we are organising 5 follow-up group discussions to find out more about young people's views about learning languages, travelling, studying and working abroad. These discussions will take place in December 2015 and January 2016, and one will take place near you. Participants will receive a £20 gift voucher. If you would like to take part in a group discussion please tick this box ☐.



We will be running another Young Life and Times Survey next year. Is there anything that you think we should be asking about life in Northern Ireland?

The results of this survey will be available in Spring of 2016. If you would like an invitation to the launch of the findings, please tick this box ☐ and fill in your contact details below.

If you would like a summary of the results, please tick this box ☐ and fill in your contact details below.

Name _____

Address _____

Telephone number _____ Email address _____

Thank you very much for taking the time to complete this questionnaire

Please post it back to us in the Freepost envelope provided; you do not need a stamp.

The 2015 Young Life and Times Survey is funded by ARK Ageing Programme, British Council Northern Ireland, Department of Education (DE) Northern Ireland, the Office of the First Minister and Deputy First Minister (OFMDFM), Sport NI and jointly by PSNI and Barnardo's NI.



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